# CAMPAIGN FINANCE REPORT STATE OF WISCONSIN GAB-2

#### COMMITTEE IDENTIFICATION

Filing Period Name:	Fall Pre-Primary 2012		OFFICE USE ONLY
	Covers all activity from 07/0	01/2012 through 07/30/2012	
Name of Committee/Corporation:	Friends of Lee Nerison		1/2.
Street Address:	S3035 CTHB		<b>GAB ID</b> : 0104289
City, State and Zip:	Westby, WI 54667		
CUMMANDV OF DECEMBER A	AND DICCUIDED AFAITE	Caluman A	Column P
SUMMADV OF RECEIPTS A	N//	Column A	Column B

SUMMARY OF RECEIPTS AND DISBURSEMENTS	Column A This Period	Column B Calendar Year-To-Date
1. RECEIPTS		
1A. Contributions (Including Loans) from Individuals	\$250.00	\$6,425.00
1B. Contributions from Committees (Transfers-In)	\$0.00	\$7,700.00
1C. Other Income and Commercial Loans	\$0.00	\$0.00
TOTAL RECEIPTS (Add totals from 1A, 1B and 1C)	\$250.00	\$14,125.00
2. DISBURSEMENTS	_	
2A. Gross Expenditures	\$352.64	\$2,043.44
2B. Contributions to Committees (Transfers-Out)	\$0.00	\$0.00
TOTAL DISBURSEMENTS (Add totals from 2A and 2B)	\$352.64	\$2,043.44

#### CASH SUMMARY

Cash Balance Beginning of Report*	\$23,909.98	
Total Receipts	\$250.00	
Subtotal	\$24,159.98	
Total Disbursements	\$352.64	
CASH BALANCE END OF REPORT*	\$23,807.34	
INCURRED OBLIGATIONS		
(Balance at the Close of This Period-3A)	\$0.00	
LOANS (Balance at the Close of This Period-3B)	\$0.00	

<sup>\*</sup>Cash Balance as reported by committee

I certify that I have examined this report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Candidate or Treasurer:	Signature of Candidate or Treasurer	Date:
Niedfeldt, Roger		Daytime Phone:

**NOTE:** The information on this form is required by ss.11.06, 11.20, Wis. Stats. Failure to provide the information may subject you to the penalties of ss.11.60, 11.61, Wis. Stats.

GAB-2 (Rev. 12/03) This form is prescribed by the Government Accountability Board, P.O. Box 7984, Madison, WI 53707-7984, 608-266-8005.

# SCHEDULE 1-A

# RECEIPTS Contributions From Individuals

Date	Full Name	Address	Occupation	Employer Name	Employer Address	Amount	YTD
Monetary							
07/05/2012	Wall, Scot	523 South St., Cashton, WI 54619	President	Bank of Cashton	723 Main St., Cashton, WI 54619	\$250.00	\$0.00
					Sub Total	\$250.00	
			1	Total Unitemize	ed Contributions	\$0.00	
			To	otal Anonymou	us Contributions	\$0.00	
Grand Total					\$250.00		
Non-Monetary (-):					\$0.00		
Loan Forgiven (-):					\$0.00		
					Total	\$250.00	

## SCHEDULE 1-B

# RECEIPTS Contributions from Committees (Transfers-In)

Date	Full Name	Address	Amount	YTD
		Grand Total	\$0.00	
	Non-Monetary (-):			
		Total	\$0.00	

# SCHEDULE 1-C

# RECEIPTS Other Income and Commercial Loans

Date	Full Name	Address	Amount	YTD
		Total	\$0.00	

# SCHEDULE 2-A

#### DISBURSEMENTS Gross Expenditures

Date	Full Name	Address	Vendor Name	Vendor Address	Expense Purpose	Amount
Monetary	•					
07/03/2012	United States Postal Service	507 Central Ave., Coon Valley, WI 54623			Postage	\$9.00
07/02/2012	Shopko	9366 State Hwy. 16, Onalaska, WI 54650			Office Supplies	\$18.52
07/02/2012	Sam's Club	1211 Crossing Meadows Dr., Onalaska, WI 54650			Parade Expenses - Fees, candy	\$135.22
07/18/2012	Valley Vinyl Signs	Box 61, Coon Valley, WI 54623			Printing Misc. (buttons, bumper stickers, t- shirts)	\$189.90
					Sub Total	\$352.64
					Grand Total	\$352.64
Non-Monetary (-):			\$0.00			
					Total	\$352.64

# SCHEDULE 2-B

# DISBURSEMENTS Contributions To Committees (Transfers-Out)

Date	Full Name	Address	Vendor Name	Vendor Address	Amount
				Grand Total	\$0.00
Non-Monetary (-):				\$0.00	
			Registrant In-Ki	nd Sub Total (-):	\$0.00
				Total	\$0.00

## SCHEDULE 3-A

### **ADDITIONAL DISCLOSURE**

#### **Incurred Obligations Excluding Loans**

Complete Committee Name: Friends of Lee Nerison

**Incurred Obligation Outstanding Amount:** \$0.00

Date	Full Name	Address	Amount
		Grand Total	\$0.00

Date	Full Name	Amount Paid
	Grand Total	\$0.00

## SCHEDULE 3-B

#### **ADDITIONAL DISCLOSURE**

#### Loans

#### **Individual, Committee or Commercial**

Complete Committee Name: Friends of Lee Nerison

**Loans Outstanding Amount:** \$0.00

Date	Lender Name	Address	Loan Amount	Loan Payment + Forgiven Amount	Outstanding Amount
				Grand Total	\$0.00